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PTO/SB/01 (10-00)

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S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

	Under the Description	Reduction Act of 1995, no person	e are required t	U.S. Pater	nt and Trademark C	Office; U.S.	DEPARTMENT C	OF COMMERCE control number.		
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"	N 1 8 DOWER O	AND F ATTORNEY		First Named I	nventor	Louis	Canuel			
别"	FOR UTILI	TY OR DESIGN		COMPLETE IF KNOWN						
W.		APPLICATION FR 1.63)		Application N	umber	09/82	9,391			
	Declaration Submitted with	R Initial Filing (Sure	charge	Filing Date		April 9	9, 2001			
	-	(37 CFR 1.16(e))		Group Art Un	<u>it</u>					
l				Examiner Na	me					
Ā	As a below named inventor, I hereby declare that:									
l p	My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
	SANITARY NAPKIN WITH BREATHABLE EXTENSION (Title of the Invention)									
tt	the specification of which									
	is attached hereto									
	OR .									
	was filed on (MM/DD/YYYY) 04/09/2001 as United States Application Number or PCT International Application Number 09/829,391 and was amended on (MM/DD/YYYY)									
l a	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
1	I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
i U	I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.									
۲	Prior Foreign			Filing Date	Priority			d Copy		
	Application Number(s)	Country	(MM/I	DD/YYYY)	Not Claim	ea	Aπac YES	hed?		
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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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DECLARATION - Utility or Design Patent Application

TRADER DECLARATION - Utility of Design Patent Application									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
Application Number(s) Filing Date (MM/DD/YYYY)									
	·	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:									
Application Serial No.	Filing Date	Status							
09/570,113	05/12/2000	Pending Patented Patented							
I hereby appoint:									
	Place Customer Number Bar Code Label Here								
AND									
Practitioner(s) named below: Name									
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United									
States Patent and Trademark Office connected therewith.									
Address all telephone calls to James P. Barr at telephone number (732) 524-2826.									
Customer Number Direct all correspondence to:									
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Country	Telephone:	Fax:							

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name **Family Name** (first and middle (if anvi) Louis or Surname **CANUEL** Inventor's Signature Date Residence: City/Repentigny State Canada Country Canada Citizenship Canada Mailing Address 79, Jasmin State Quebec, Canad **ZIP** H6A 5V6 Country Canada I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name **Family Name** (first and middle [if any]) or Surname Inventor's Signature Residence: City State Country Citizenship **Mailing Address** State ZIP Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF THIRD INVENTOR: A petition has been filed for this unsigned inventor **Given Name Family Name** (first and middle [if any]) or Surname Inventor's Signature **Date** Residence: City State Country Citizenship **Mailing Address** State ZIP City Country